

UCA THEATRE PERFORMANCE SCHOLARSHIP APPLICATION
Future Students

(This application is for entering freshman or transfer students.)

Name (First Middle Last): _____

UCA ID (if assigned): _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Mother's Name: _____ Father's Name: _____

Who is recommending you: name(s)/title(s)? _____

Entering Freshman

High School: _____

High School Location (City/State): _____

Graduation Date: _____ GPA: _____ ACT Score: _____

Transfer Student

Previous College Attended: _____

Previous College Location (City/State): _____

UCA Enrollment Date: _____ GPA: _____ ACT Score: _____

The following items are required for this scholarship.

Current Resume

Letter of Application

Letter(s) of Recommendation: *may be mailed separately by the teacher(s)*

Audition/Material Presentations Date _____

Applications for Admission to the University of Central Arkansas should be sent directly to the Office of Admissions.

Signature of Applicant: _____ Date: _____

SPRING 2015 application is due November 20, 2015, by 4:30 pm.

This application should be returned to Melissa Kordsmeier, Theatre Business Manager at mkordsmeier@uca.edu or by mailing it to the address below.

UCA Theatre : P.O. Box 4942 : Conway, AR 72035-0001 : (501) 450-5092